

# FREDERICK COUNTY ANIMAL CONTROL'S

## ANIMAL CAMP 2012 Application

July 9-13 or July 23-27 (please circle one)

Name : \_\_\_\_\_ Grade (2012 -2013) \_\_\_\_\_ Age at Camp \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent or Legal Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address : \_\_\_\_\_ Email : \_\_\_\_\_

Please circle shirt size: YS YM YL AS AM AL Does camper have animal allergies? Y or N

Emergency Contact Information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell : \_\_\_\_\_

Does the camper take any medication? Y or N Does the camper have any food allergies? Y or N

If yes to medication or food allergies please explain: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail application to: Animal Camp 2010 c/o Casey Mills 4294 Molesworth Terr. Mt Airy MD 21771  
along with a \$50.00 check payable to Frederick County Animal Control. If the camp is full, your check  
will be returned. Any questions, email : pawprintzonmyheart@comcast.net

**FREDERICK COUNTY ANIMAL CONTROL**  
**ANIMAL CAMP WAIVER**  
**July 9- 13 2012; July 23-27, 2012**

**WAIVER OF LIABILITY**

I, as an animal camp participant/volunteer service provider to Frederick County Animal Control, hereby knowingly, freely and voluntarily waive all claims for injuries, losses, combinations thereof, and/or demands of any incident arising as a result of such activity on or off the premises, from which any liability may or could occur against the Frederick County Government and Frederick County Animal Control or its agents or employees jointly or individually. I declare that I shall not hold the Frederick County Animal Control liable for any illness, injury or disease I might contract or sustain while I am working in said capacity. I also understand that I am not covered under Workman's Compensation.

I fully recognize the possible dangers associated with the work of the Frederick County Animal Control, and I freely consent to this waiver. Frederick County Animal Control makes no representations concerning any animal's exposure to rabies or other diseases.

I further understand that the use of alcoholic beverages or controlled dangerous substances will not be allowed on or off the premises while serving in a volunteer capacity for Frederick County Animal Control.

Camper's Name: \_\_\_\_\_

Date:\_\_\_\_\_

Parent/Guardian Name:\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_